

LAYERED TEXTILE HISTORY FORM

Please make sure to fill this out and attach to Entry Form

Name: _____

Address: _____ City: _____ State: _____

Zip: _____ Phone: _____ Cell: _____

Maker of Quilt: _____

Owner of Quilt: _____

Quilt Name: _____ Size: (width) _____ (length) _____

(If your quilt will be auctioned, the auctioneer will use this information to help auction off your quilt)

Please include in your history of the quilt things like, year made, by whom, where, how old the maker was when made, for what reason made, and how you obtained it. Not all of these pertain to every quilt.

(use the back if you need more room)

-----CUT HERE-----

(Exhibitors Copy)

Each quilt must have a label sewn on, even if for "Display Only" and a sleeve attached.
Cut out and sew on the lower right hand corner on back of quilt.

<input type="checkbox"/>	<input type="checkbox"/>
Check Box if for Display Only	Check Box if Quilt is an Auction Quilt
Name: _____	Quilt Name: _____
Address: _____	Telephone: _____
Size (Width) _____ (Length) _____	Exhibitor Number (office use only): _____
Name of Person Picking Up Quilt: _____	
Pick Up and Return Point (circle one):	
TC Fair Highland Art Center S. Trinity School Dist. Office (vanduzen rd) Moose Lodge (Lewiston)	